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PTO/SB/01 (10-00)

Approved for use through 10/31/2002. OMB 0651-0032

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**DECLARATION FOR UTILITY OR
DESIGN
PATENT APPLICATION
(37 CFR 1.63)**

Declaration Submitted with Initial Filing OR Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)

Attorney Docket Number	60,449-072
First Named Inventor	Otman A. Basir
COMPLETE IF KNOWN	
Application Number	10 / 615581
Filing Date	July 8, 2003
Group Art Unit	2858
Examiner Name	Unknown

As a below named inventor, I hereby declare that:

My residence, mailing address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

INTEGRATED OCCUPANT SENSORY SYSTEM

(Title of the Invention)

the specification of which

is attached hereto

OR

was filed on (MM/DD/YYYY)

as United States Application Number or PCT International

(if applicable).

Application Number and was amended on (MM/DD/YYYY)

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached? YES	Certified Copy Attached? NO
			<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>

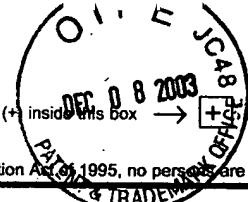
Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.

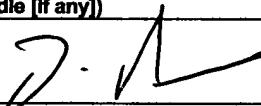
Application Number(s)	Filing Date (MM/DD/YYYY)	<input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.
60/394,470	July 8, 2002	<input type="checkbox"/>

[Page 1 of 2]

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DECLARATION — Utility or Design Patent Application

Direct all correspondence to:		<input checked="" type="checkbox"/> Customer Number or Bar Code Label	026096	<input type="checkbox"/> OR <input type="checkbox"/> Correspondence address below
Name John E. Carlson Address 400 W. Maple Road Address Suite 350 City Birmingham State Michigan ZIP 48009 Country United States Telephone (248) 988-8360 Fax (248) 988-8363				
<p>I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.</p>				
NAME OF SOLE OR FIRST INVENTOR :		<input type="checkbox"/> A petition has been filed for this unsigned inventor		
Given Name (first and middle [if any]) Otman A. Inventor's Signature 		Family Name Basir or Surname Date Nov 20/03		
Residence: City Waterloo		State ON	Country Canada	Citizenship Canadian
Mailing Address 485 Claywood Court				
Mailing Address				
City Waterloo		State Ontario	ZIP N2T 2C6	Country Canada
NAME OF SECOND INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor		
Given Name (first and middle [if any]) Brian Inventor's Signature 		Family Name Johnson or Surname Date Nov 24/03		
Residence: City Waterloo		State ON	Country Canada	Citizenship Canadian
Mailing Address 295 Dale Crescent, Apt. 403				
Mailing Address				
City Waterloo		State Ontario	ZIP N2J 3Y5	Country Canada
<input checked="" type="checkbox"/> Additional inventors are being named on the 1 supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.				

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PTO/SB/02A (11-00)

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DECLARATION

ADDITIONAL INVENTOR(S) Supplemental Sheet Page 1 of 3

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Kristopher		Desrochers	
Inventor's Signature	<i>Kris Desrochers</i>		
Residence: City	Kitchener	State	ON
Country	Canada		
Citizenship	Canadian		
115 High Brook Street			
Mailing Address			
City Kitchener		State ON	ZIP N2E 3P3
Country Canada		Citizenship Canada	
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Fakhreddine		<i>Karray</i>	
Inventor's Signature	<i>Fakhreddine Karray</i>		
Residence: City	Waterloo	State	ON
Country	Canada		
Citizenship	Canadian		
298 Amberwood Drive			
Mailing Address			
City Waterloo		State ON	ZIP N2T 2G4
Country Canada		Citizenship Canada	
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Inventor's Signature			
Residence: City	State	Country	Citizenship
Mailing Address			
Mailing Address			
City	State	ZIP	Country

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PTO/SB/02C (3-97)

Approved for use through 9/30/98. OMB 0651-0032

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DECLARATION		REGISTERED PRACTITIONER INFORMATION (Supplemental Sheet)	
Name	Registration Number	Name	Registration Number
Theodore W. Olds	33,080		
John E. Carlson	37,794		
David J. Gaskey	37,139		
Kerrie A. Laba	42,777		
William S. Gottschalk	44,130		
David L. Wisz	46,350		
Karin H. Butchko	45,864		
John M. Siragusa	46,174		
Anthony P. Cho	47,209		
Anna M. Shih	36,372		

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